2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State
01-12-2006 90191 008 ****70.00

DOCUMENT # N99000007108

1. Entity Name
STRUGGLED BUT NOT ALONE, INC.

Principal Place of Business	Mailing Address
420 NE 142ND STREET MIAMI, FL 33161	420 NE 142ND STREET MIAMI, FL 33161

400001543

01092006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0967322 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DESLANDES, LUNA M 420 NE 142 STREET NORTH MIAMI, FL 33161	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DESLANDES, LUNA M 420 NE 142ND STREET N MIAMI, FL 33161	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Deslandes, Luna Marchand 420 NE 142nd Street North Miami, FL 33161	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C JOSPEH, GUETIE 14825 NE 5TH AVE MIAMI, FL 33161	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chair/D Joseph, Guetie P. 14825 NE 5th Avenue Miami, FL 33161	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC JEROME, MARIE JOSE 4011 KINGS HWY #1-B BKLYN, NY 11234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-Chair/D Jerome, Marie Jose 4011 Kings Hwy, #1-B Brooklyn, NY 11234	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MOMPLAISIR, MARIE C 20310 NE 12 COURT MIAMI, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Treasurer Marie Josee Jeanty 550 NE 162nd Street North Miami Beach, FL 33162	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BPA DESLANDES, MARC E 420 NE 142ND STREETH NO. MIAMI, FL 33161	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Assistant/D Momplaisir, Marie Carmel 20310 NE 12 Court Miami, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MATTHIEU, TECHELINE 120 NE 59 ST. MIAMI, FL 33137	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Program Director/D Mathieu, Techeline 120 NE 59th Street Miami, FL 33137	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luna Marchand Deslandes Luna Marchand Deslandes 1/9/2006 305-542-2328
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #